Facility Name

### South Carolina Department of Health & Environmental Control Division of Health Licensing

License Nbr/Expiration Date

County: Williamsburg

Facility Type: Adult Day Care

Location Street County/Ownership Typ Location City, State Mailing/Billing Addres Administrator/Phone Licensed Unit Licensee HOPEWELL SENIOR DAY CARE CENTER ADC-0206 / 08/31/2009 12 1277 BLAKELY RD Williamsburg / Corporation SALTERS, SC 29590 1277 BLAKELY RD EVANS, DOTTIE M PH#: 843-387-6376 SALTERS, SC 29590 HOPEWELL SENIOR DAY CARE INC Fac. Cont. Email:HOPEJ@FTC-I.NET Number of Participants 12 NEW MOUNT CARMEL ADULT DAY CARE ADC-0244 / 11/30/2009 28 797 TUPPERWARE RD Williamsburg / Corporation HEMINGWAY, SC 29554 PO BOX 1113 WASHINGTON, DENEICE S PH#: 843-558-5053 HEMINGWAY, SC 29554 Fac. Cont. Email:N/AG E T EDUCATIONAL RESOURCES CENTER INC

Number of Participants 28

RUTH LOUIS ADULT HEALTH DAY CARE INC #2 ADC-0250 / 12/31/2009 69

111 E MILL ST

111 E MILL ST Williamsburg / Non-Profit Corporation

KINGSTREE, SC 29556

NESMITH, PEARL PH#: 843-221-5848 KINGSTREE, SC 29556

Fac. Cont. Email: RUTHLOISADC@FTC-I.NET RUTH LOUIS ADULT HEALTH DAY CARE

Number of Participants 6

DOI OI IGIOIOIPGIIOD

Totals For Facility/License Type Adult Day Care

Number of Activities/Facilities licensed: 3 Number Licensed Units 109

# South Carolina Department of Health & Environmental Control Division of Health Licensing

#### County: Williamsburg

Facility Type: Community Residential Care Fac	cility	
Facility Name Location Street Location City, State Administrator/Phone	License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Addres Licensee Licens	ed Unit
GOOD SAMARITAN RESIDENTIAL CARE	CRC-1015 / 05/31/2009	9
1356 BUBZY RD	Williamsburg / Corporation	
KINGSTREE, SC 29556	1356 BUBZY RD	
DUROUSSEAU, MATTIE H PH#: 843-382-3530	KINGSTREE, SC 29556	
Fac. Cont. Email:No Fac Cont. email on record	GOOD SAMARITAN RESIDENTIAL CARE FACILITY INC	
Certifications:None		
MY HOUSE COMMUNITY HOME	CRC-1318 / 07/31/2009	4
273 MARTIN RD	Williamsburg / Sole Proprietorship	
CADES, SC 29518	PO BOX 358	
GLASSCHO, GERMAN PH#: 843-382-3277	GREELEYVILLE, SC 29056	
Fac. Cont. Email:No Fac Cont. email on record	GERMAN GLASSCHO	
Certifications:None		
S M STRONG'S COMMUNITY RESIDENTIAL CARE	CRC-1195 / 02/28/2010	5
65 DOVE ST	Williamsburg / Sole Proprietorship	
KINGSTREE, SC 29556	PO BOX 173	
JACKSON, JACQUES G PH#: 843-426-4723	KINGSTREE, SC 29556-0173	
Fac. Cont. Email:No Fac Cont. email on record	SUSIE M STRONG	
Certifications:None		
WILLIAMSBURG RESIDENTIAL CARE FACILITY	CRC-0038 / 03/31/2010	24
14 WRCF ST	Williamsburg / Partnership	
KINGSTREE, SC 29556-2596	PO BOX 147	
JACKSON, JACQUES G PH#: 843-355-6214	SALTERS, SC 29590	
Fac. Cont. Email:JGJACKSON@FTC-I.NET	JACQUES G JACKSON AND SUSIE M GORDON	
Certifications:None		

Totals For Facility/License Type Community Residential Care Facility	
Number of Activities/Facilities licensed: 4 Number Licensed Units	42

Division of Health Licensing

County: Williamsburg

500 NELSON BLVD

Facility Type: Hospital or Institutional General Infirmary

Facility Name
License Nbr/Expiration Date
Location Street
County/Ownership Typ
Location City, State
Mailing/Billing Addres

Administrator/Phone Licensee Licensed Unit

WILLIAMSBURG REGIONAL HOSPITAL HTL-0841 / 10/31/2009

Williamsburg / Non-Profit Corporation

KINGSTREE, SC 29556-4027 PO BOX 568

HALES, JOHN C PH#: 843-355-8888 KINGSTREE, SC 29556-0568

Fac. Cont. Email: JGAMBLE@WMBGRH.COM WILLIAMSBURG REGIONAL HOSPITAL INC

Licensed Beds: General: 25 Psychistric: 0 Rehab: 0 Substance Abuse 0

Other Beds NICU: 0 Neonatal Special Care 0

Certifications: JCAHO Accredited, Critical Access Hospital

Totals For Fa	acility/License	Type	Hospital	or	Institutional	General	Infirmary
---------------	-----------------	------	----------	----	---------------	---------	-----------

Number of Activities/Facilities licensed: 1 Number Licensed Units

25

25

April 2, 2009 South Carolina Department of Health & Environmental Control

Division of Health Licensing

1

County: Williamsburg

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone

License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Addres Licensee

Licensed Unit

96

KINGSTREE NURSING FACILITY INC

NCF-0937 / 12/31/2009 401 NELSON BLVD KINGSTREE, SC 29556-4024

Williamsburg / Corporation

401 NELSON BLVD

SLAVINSKI, CANDICE J PH#: 843-355-6116 KINGSTREE, SC 29556 Fac. Cont. Email:CSLAVINSKI@COOKE-ASSOCIATES.COM KINGSTREE NURSING FACILITY INC

Licensed Beds Nursing Home 96 Institutional Nursing Home

Certifications:None

Totals	For	Facility/License	Type	Nursing	Home
--------	-----	------------------	------	---------	------

Number of Activities/Facilities licensed:

Number Licensed Units

April 2, 2009

## South Carolina Department of Health & Environmental Control Division of Health Licensing

County: Williamsburg

Facility Type: PSAD Outpatient

Facility Name Location Street Location City, State Administrator/Phone License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Addres Licensee

Licensed Unit

WILLIAMSBURG COUNTY DEPARTMENT ON ALCOHOL & DRUG ABUSE

115 SHORT ST

KINGSTREE, SC 29556

GRAHAM, JACKIE S PH#: 843-355-9113

Fac. Cont. Email:WCADABUSE@FTC-I.NET

OTP-0019 / 06/30/2009 Williamsburg / County PO BOX 506

KINGSTREE, SC 29556 WILLIAMSBURG COUNTY COUNCIL

Certifications:None

Totals For Facility/License Type	PSAD Outpat	ient
----------------------------------	-------------	------

Number of Activities/Facilities licensed:

Number Licensed Units

#### South Carolina Department of Health & Environmental Control Division of Health Licensing

County: Williamsburg

Facility Type: Renal Dialysis

Facility Name Location Street Location City, State Administrator/Phone

License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Addres Licensee

Licensed Unit

12

FMC DIALYSIS SERVICES - ANDREWS ERD-0115 / 05/31/2009 102 S COUNTY LINE RD

ANDREWS, SC 29510-8125

LIVESAY, WILLIAM G PH#: 843-221-5454

Fac. Cont. Email:CLINIC2359@FMC-NA.COM

Williamsburg / Corporation

102 S COUNTY LINE RD ANDREWS, SC 29510-8125

BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC

Licensed Stations: Hemodialysis: 12 Peritoneal: 0

KINGSTREE DIALYSIS CENTER

1468 EASTLAND AVE

KINGSTREE, SC 29556-6036

PRESSLEY, GAIL S PH#: 843-382-9791 Fac. Cont. Email: No Fac Cont. email on record

ERD-0069 / 08/31/2009

Williamsburg / Corporation

33

1468 EASTLAND AVE

KINGSTREE, SC 29556

BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC

Licensed Stations: Hemodialysis: 33 Peritoneal: 0

Totals For Facility/License Type Renal Dialysis

Number of Activities/Facilities licensed:

Number Licensed Units

45

Number of Activities/Facilities licensed in county of Williamsburg

12

Number Licensed Units:

# Lics

Report Total

Total Number of Activities/Facilities licensed

12

Total Number Licensed Units